

Home Care Instructions after Lumbar Laminectomy, Decompression or Discectomy Surgery

Doctor: _____

This handout will review the care you need to follow once you are home.

If you have any questions or concerns, please ask your nurse or doctor.

Activity/Limits

- You should slowly increase your activity. In most cases, common sense will tell you when you are doing too much. On the other hand, doing too little may delay the return of your strength and stamina.
- Change your position every 45-60 minutes while awake.
- Begin walking 3 times a day once you return home from the hospital. Increase the distance as you can.
- You may walk anywhere your footing is safe; stairs, treadmills, walking tracks, or inclines.
- No sports, aerobic or cardio activities until seen at your follow up visit.

Until your 4-6-week post-op visit with your surgeon:

- No lifting greater than 10 pounds.
- Avoid strenuous and jarring activities.
- Avoid bending or twisting at the waist.

Driving

- Do not drive while taking narcotic pain medicine.
- Do not drive until your reflexes return to normal and you feel safe to do so.

Return to Work

The length of time off work will depend on your postop symptoms and type of work you do. If you plan to return to work before your first post-op visit you will have restrictions. Please talk about this with your doctor or nurse.

Sexual Activity

- No sex for 2 weeks.
- After 2 weeks, you may resume sex if comfortable.

Sleeping

Sleep on either your back or side. Pillows may be used to help support your back.

- Place pillows behind your knees when lying on your back.
- Place pillows behind your back and between your legs when lying on your side.

Bathing

- The first 5 days after surgery, the incision area should remain dry and covered with the surgical dressing. You can bathe if the dressing remains clean, dry and secure.
- After 5 days, you may gently remove the dressing and shower with the incision uncovered.
- Do not wash directly over your incision. Carefully pat incision dry.

- Avoid hot tubs, swimming pools, and lakes for at least 6 weeks after surgery.

Incision Care

Proper incision care helps to decrease risk of infection. The incision is closed with dissolvable sutures. These should dissolve in 2-3 weeks.

- Surgical dressing should remain in place for 5 days after surgery. Inspect dressing daily to ensure it is clean, dry and secure.
- After the first 5 days, dressing may be changed every other day as needed.
- If no drainage is present, the incision may be left uncovered.
- Some redness and swelling around the incision is normal.
- Do not use any creams, lotions, ointments or alcohol near or on incision.

Once able to remove the dressing, check incision for:

- Redness
- Swelling
- Drainage
- Warmth

Smoking

We strongly suggest you quit using nicotine prior to surgery. It is best to be nicotine free for at least 4-6 months after surgery. Forms of nicotine include:

- Cigarettes
- Cigars
- Pipe
- Chewing tobacco
- Nicotine patches
- E-cigarettes/vapes
- Nicotine gum
- Second-hand smoke

Compression Stockings

Please wear your compression stockings until you are walking three times a day. This is most often 2-3 days after leaving the hospital. If you notice swelling to your legs, please elevate and put on compression stockings. If swelling does not improve, please call the clinic to discuss.

Pain Management

During the healing phase, it is common to have some pain, numbness, tingling and weakness in your legs. Call the Spine Clinic if there is a major change in your symptoms. To manage pain after surgery:

- Ice the incision area for 20-30 minutes several times a day or after increased activity. Be sure to use a towel as a barrier between the ice pack and skin to avoid any skin injuries.
- Reduce overall activity for 48 hours.
- Take opioid (narcotic) pain medicine as prescribed by your doctor. If you feel the medicine is not decreasing your pain, please call the clinic. Do not increase this pain medicine without talking to your doctor first.
- It is okay to take anti-inflammatory medicine (ibuprofen, Aleve[®], aspirin, Diclofenac, etc) right away after surgery.
- It is okay to take Tylenol[®] (Acetaminophen) right away. Do not take more than 3000mg within a 24-hour period.
- If you have been taking Gabapentin/Neurontin before surgery, you should keep taking it unless you have been told to stop.

Refills

The goal is to taper you off all narcotic pain medicine 4-6 weeks after surgery. If you need a refill, please call the clinic. Call 2-3 business days before you need the refill. Please provide the pharmacy where you want to pick up a refill.

Constipation

Please refer to Health Facts for You: Constipation from Opioids (Narcotics) found in the Postoperative Spine Surgery Packet.

When to Call the Doctor

- Increased pain, redness or swelling around the incision
- A change in the amount, color, or odor of drainage
- Redness, warmth or pain in your calf
- A temperature above 100.5 F for 24 hours
- A constant headache that changes between sitting, standing and lying down
- New chest pain or new problems breathing
- Problems urinating or losing control of your bladder or bowel movements

Future Clinic Visits

Your first clinic visit will be 2-3 weeks after surgery to remove sutures or staples. A 6-week post-op visit will be scheduled to check healing and symptoms. All other clinic visits will be determined by your doctor.

Phone Numbers

If you have questions or concerns, please call the Spine Clinic Monday through Friday between 8:00 AM and 5:00 PM at **(608) 265-3207**.

Nights, Weekends and Holidays, call the paging operator at **(608) 262-0486**. Ask for the “spine resident on call.” Leave your name and phone number with the area code. The doctor will call you back.

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 5/2018 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#4466